

# APPLICATION DATA SHEET

Application Information	
Application Number::	
Filing Date::	Herewith
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	435/375
Suggested Group Art Unit::	1635
CD-ROM or CD-R::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	Paper
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	Antisense Modulation of Microsomal Triglyceride Transfer Protein Expression
Attorney Docket Number::	ISPH-0591US.C1
Request for Early Publication?	No
Request for Non-Publication?	No
Suggested Drawing Figure::	N/A
Total Drawing Sheets::	0
Small Entity::	No
Latin name::	
Variety denomination name	
Petition Included::	No
Petition Type	
Licensed US Govt. Agency::	
Contract or Grant Number::	
Secrecy Order in Parent Application::	No

Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Rosanne
Middle Name::	M
Family Name::	Crooke
Name Suffix::	
City of Residence::	Carlsbad
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	3211 Piragua Street
City of Mailing Address::	Carlsbad
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	92009

Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Mark
Middle Name::	J
Family Name::	Graham
Name Suffix::	
City of Residence::	San Clemente
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	2305 S. Ola Vista
City of Mailing Address::	San Clemente
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	92672

Correspondence Information	
Correspondence Customer Number::	36441
Name::	Howson and Howson
Street of Mailing Address	Spring House Corporate Center, Box 457
City of Mailing Address	Spring House
State or Province of Mailing Address	PA
Country of Mailing Address	US
Postal or Zip Code of Mailing Address::	19477
Phone Number::	215-540-9200
Fax Number::	215-540-5818
E-Mail Address::	mebak@howsonandhowson.com

Representative Information		
Representative Customer No. 36441	Registration Number	Name

Domestic Priority Information			
Application	Continuity Type	Parent Application	Parent Filing Date
This Application	Continuation of	09/917,963	07/30/01

Assignee Information	
Assignee Name::	ISIS Pharmaceuticals, Inc.
Street of Mailing Address::	2292 Faraday Avenue
City of Mailing Address::	Carlsbad
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	92008